

321 N. Madison Avenue Richmond, Kentucky 40475 Phone: 859-623-1658 Fax: 859-623-2598 www.kreab.ky.gov

Real Property Appraiser Supervisor Application

INSTRUCTIONS: Please type, or print legibly in ink, all information below.

Applicant:			
(Last Name)	(First Name)		(MI)
KY Certification No			
Home Address			
Physical Address	City	State	Zip Code
Mailing Address:			
Address	City	State	Zip Code
Business or Company Name:			
Business Address:			
City		State	Zip Code
County of Residence:			
	Home Phone	Work Phone	Fax No.
E-Mail Address:			
Social Security Number	So	ex: Male Fe	emale
Social Security Number(Mu	ist Provide)		
Date and Place of Birth/			
Month	Date Year (City	State
Driver License Number:	State of	of Issue:	
List Associates You Supervise:			
Associate			
(Last Name)	(First Name)		(MI)
Associate			
(Last Name)	(First Name)		(MI)
Associate			
(Last Name)	(First Name)		(MI)

1. Have you been a certified appraiser with the KREAB for at least 36-months?		
3. Are you currently in good standing with all agencies and commissions with whom you hold a license or certification? Yes No 4. Have you ever had an application for certification or licensure as a real property appraiser denied by any State? If yes, please explain and submit to the KREAB a copy of the letter or order of denial. Yes No 5. Have you ever been reprimanded or fined or had a license, certification or any credential suspended, revoked, restricted, denied or surrendered in this or any State by any agency that has granted you a license, certificate or registration to engage in a regulation, trade or profession? If so, explain and submit a copy of any documentation that describes the charges against you and the action taken by the agency. Yes No 6. Are you the subject of any pending investigation, administrative sanction proceeding, hearing, trial or similar action by any agency that has granted or denied you a license, certificate or registration to engage in a regulated occupation, trade or profession? If so, explain and submit a copy of any documentation that describes the charges against you. Yes No 7. Have you ever entered a plea of nolo contrendere, been found guilty of or convicted of a felony? If yes, and the information has not been previously submitted in a prior application to the KREAB, fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Include a copy of all final court documents identifying changes and assessing penalities. Yes No 8. Are you now awaiting trial or sentencing in any criminal proceeding? If yes, fully explain the facts of the alleged offense and identify the location of the proceedings. Yes No 9. Have you ever used any name other than the one herein, either initials, surname, maiden name, or alias? If yes, please state all other names used.	1. Have you been a certified appraiser with the KREAB for at least 36-months?	☐ Yes No ☐
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any State? If yes, please explain and submit to the KREAB a copy of the letter or order of denial. Yes No	a license or certification?	you hold
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☐ Yes No ☐		maiden
		☐ Yes No ☐

CERTIFICATION

- I certify that the information provided herein is true and correct to the best of my knowledge.
- I understand that withholding information, falsification or misrepresentation of any of the information submitted as part of this application is grounds for denial of issuance of a Supervising Appraiser Endorsement and could be grounds for subsequent disciplinary hearings.
- I certify that I have read the KRS 324A statutes and 201 KAR Chapter 30 regulations and I understand that it is my responsibility to comply with all state regulations including the Uniform Standards of Professional Appraisal Practice (USPAP) and that failure to comply is cause for disciplinary action.
- I certify that I will fulfill the responsibilities of a Supervising Appraiser as described in 201 KAR 30:030 when training any Kentucky Associate Real Property Appraiser that may work under my direct supervision.
- I understand that the Board may conduct a criminal background check on any applicant and that my signature on this application is my consent for the Board to conduct a criminal offender record check in connection with this application.
- I understand that my social security number is required pursuant to this application being approved and that failure to provide my social security number will be a basis to refuse a Kentucky Supervising Appraiser approval.
- I also understand that my social security number will be used for child support enforcement purposes, criminal background checks, national registry identification and or/taxpayer identification.
- I certify that I understand that the KREAB staff or a Board designee has the right to enter any office, branch office, or building where records are maintained of any Kentucky appraiser licensee or certificate holder for the purpose of inspecting all documents required by the board which relate to any allegations of practices that violate the provisions of KRS 324A or 201 KAR Chapter 30, and USPAP.

ure of Applicant	Date
ure of Applicant	Date